

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 32
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Osteopathic Information Association - Osteopathic Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hetal R. Patel DO

Mailing Address 41 Delmore Dr

City

Kendall Park

State

NJ

Zip Code

08824-7017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 38607847

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Ray Quintero

Mailing Address 11090 Vermont Ave, NW
Ste 510

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

American Osteopathic Association

Occupation

Vice President

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 38607849

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Steven Fredric Rubin DO, FACOF

Mailing Address 805 Minogue Ter

City

Paramus

State

NJ

Zip Code

07652-3800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Physician

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 29 / 2015

Transaction ID : 38607850

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

475.00